

SC0194WD

**MOTOROLA****FAX TRANSMITTAL SHEET**

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**URGENT: RESPONSE AFTER FINAL****42**

Number of Pages (including this page)

Date: July 28, 2003  
To: Examiner David S. Blum - Group Art Unit 2813  
Location: United States Patent and Trademark Office  
Fax No.: (703) 872-9319  
From: Michael Balconi-Lamica - 34,291  
Subject: 09/966,046- Karl Mautz *et al.*

*D/*  
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**MESSAGE:**

Enclosed herewith, please find the following, listed below, for filing in the below-identified application. If Applicant has overlooked any fees, or if any overpayment has been made, the Commissioner is hereby authorized to credit or debit Deposit 502117.

1. Amendment After Final (5 pages)
2. Fee Calculation sheet (2 pages - one is duplicate)
3. Information Disclosure Statement (3 pages)
4. Form PTO/SB/08A listing references AA-AC (1 page)
5. Foreign Search Report (3 pages)
6. References (28 pages)

**PLEASE GIVE THESE PAPERS TO:**

EXAMINER: David S. Blum  
GROUP ART UNIT: 2813  
SERIAL NO.: 09/966,046  
FILED: SEPTEMBER 28, 2001  
INVENTOR: Karl Mautz *et al.*

| FEE TRANSMITTAL   |                                  | Complete if Known  |                    |  |                  |                 |                    |                 |          |          |          |                        |      |      |      |      |                                     |                                   |    |      |                  |                                     |      |                                       |      |      |                           |      |      |   |      |   |      |      |      |   |  |                     |       |      |       |   |                  |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                            |  |  |  |  |
|---|----------------------------------|--|--------------------|--|------------------|-----------------|--------------------|-----------------|----------|----------|----------|------------------------|------|------|------|------|-------------------------------------|-----------------------------------|----|------|------------------|-------------------------------------|------|---------------------------------------|------|------|---------------------------|------|------|---|------|---|------|------|------|---|--|---------------------|-------|------|-------|---|------------------|-----|------|----|--|------|-----|------|-----|---|------|-----|------|-----|--|------|------|------|-----|---|------|------|------|-----|--|------|-----|------|-----|------------------|------|-----|------|-----|--|------|-----|------|-----|--------------------------|------|------|------|------|---|------|-----|------|----|----------------------------------|------|------|------|-----|------------------------------------|------|------|------|-----|--------------------------------|------|-----|------|-----|------------------|------|-----|------|-----|-----------------|------|-----|------|-----|-------------------------------|------|----|------|----|-------------------------------------|------|-----|------|-----|-------------------|------|----|------|----|--|------|-----|------|-----|---|------|-----|------|-----|--|------|-----|------|-----|---|------|-----|------|-----|---|----------------------------|--|--|--|--|
| Patent fees are subject to annual revision<br><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27  |                                  | Application Number   | 09/966,046         |  |                  |                 |                    |                 |          |          |          |                        |      |      |      |      |                                     |                                   |    |      |                  |                                     |      |                                       |      |      |                           |      |      |   |      |   |      |      |      |   |  |                     |       |      |       |   |                  |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                            |  |  |  |  |
|   |                                  | Filing Date  | September 28, 2001 |  |                  |                 |                    |                 |          |          |          |                        |      |      |      |      |                                     |                                   |    |      |                  |                                     |      |                                       |      |      |                           |      |      |   |      |   |      |      |      |   |  |                     |       |      |       |   |                  |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                            |  |  |  |  |
|   |                                  | First Named Inventor   | Karl Mautz         |  |                  |                 |                    |                 |          |          |          |                        |      |      |      |      |                                     |                                   |    |      |                  |                                     |      |                                       |      |      |                           |      |      |   |      |   |      |      |      |   |  |                     |       |      |       |   |                  |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                            |  |  |  |  |
|   |                                  | Examiner Name  | David S. Blum      |  |                  |                 |                    |                 |          |          |          |                        |      |      |      |      |                                     |                                   |    |      |                  |                                     |      |                                       |      |      |                           |      |      |   |      |   |      |      |      |   |  |                     |       |      |       |   |                  |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                            |  |  |  |  |
|   |                                  | Group Art Unit   | 2813               |  |                  |                 |                    |                 |          |          |          |                        |      |      |      |      |                                     |                                   |    |      |                  |                                     |      |                                       |      |      |                           |      |      |   |      |   |      |      |      |   |  |                     |       |      |       |   |                  |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                            |  |  |  |  |
| TOTAL AMOUNT OF PAYMENT   |                                  | (\$)   | 180.00             |  |                  |                 |                    |                 |          |          |          |                        |      |      |      |      |                                     |                                   |    |      |                  |                                     |      |                                       |      |      |                           |      |      |   |      |   |      |      |      |   |  |                     |       |      |       |   |                  |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                            |  |  |  |  |
| Attorney Docket No.   |                                  | SC0194WD   |                    |  |                  |                 |                    |                 |          |          |          |                        |      |      |      |      |                                     |                                   |    |      |                  |                                     |      |                                       |      |      |                           |      |      |   |      |   |      |      |      |   |  |                     |       |      |       |   |                  |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                            |  |  |  |  |
| METHOD OF PAYMENT (check all that apply)  |                                  | FEE CALCULATION (continued)  |                    |  |                  |                 |                    |                 |          |          |          |                        |      |      |      |      |                                     |                                   |    |      |                  |                                     |      |                                       |      |      |                           |      |      |   |      |   |      |      |      |   |  |                     |       |      |       |   |                  |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                            |  |  |  |  |
| <input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None<br><input checked="" type="checkbox"/> Deposit Account:<br>Deposit Account Number: <u>502117</u><br>Deposit Account Name: <u>Motorola, Inc.</u><br>The Director is authorized to: (check all that apply)<br><input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments<br><input type="checkbox"/> Charge any additional fee(s) during the pendency of this application<br><input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.  |                                  | <b>3. ADDITIONAL FEES</b><br><table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr><td>1051</td><td>130</td><td>2051</td><td>65</td><td>Surcharge - late filing fee or oath</td></tr> <tr><td>1052</td><td>50</td><td>2052</td><td>25</td><td>Surcharge - late Provisional filing</td></tr> <tr><td>1053</td><td>130</td><td>1053</td><td>130</td><td>Non-English specification</td></tr> <tr><td>1812</td><td>2520</td><td>1812</td><td>2520</td><td>For filing a request for ex parte Reexamination</td></tr> <tr><td>1804</td><td>920*</td><td>1804</td><td>920*</td><td>Requesting publication of SIR prior to Examiner action</td></tr> <tr><td>1805</td><td>1840*</td><td>1805</td><td>1840*</td><td>Requesting publication of SIR after Examiner action</td></tr> <tr><td>1251</td><td>110</td><td>2251</td><td>55</td><td>Extension for reply within first month</td></tr> <tr><td>1252</td><td>410</td><td>2252</td><td>205</td><td>Extension for reply within second month</td></tr> <tr><td>1253</td><td>830</td><td>2253</td><td>465</td><td>Extension for reply within third month</td></tr> <tr><td>1254</td><td>1450</td><td>2254</td><td>725</td><td>Extension for reply within fourth month</td></tr> <tr><td>1255</td><td>1870</td><td>2255</td><td>985</td><td>Extension for reply within fifth month</td></tr> <tr><td>1401</td><td>320</td><td>2401</td><td>160</td><td>Notice of Appeal</td></tr> <tr><td>1402</td><td>320</td><td>2402</td><td>160</td><td>Filing a brief in support of an appeal</td></tr> <tr><td>1403</td><td>260</td><td>2403</td><td>140</td><td>Request for oral hearing</td></tr> <tr><td>1451</td><td>1510</td><td>1451</td><td>1510</td><td>Petition to institute a public use proceeding</td></tr> <tr><td>1452</td><td>110</td><td>2452</td><td>55</td><td>Petition to revive - unavoidable</td></tr> <tr><td>1453</td><td>1300</td><td>2453</td><td>650</td><td>Petition to revive - unintentional</td></tr> <tr><td>1501</td><td>1300</td><td>2501</td><td>650</td><td>Utility issue fee (or reissue)</td></tr> <tr><td>1502</td><td>470</td><td>2502</td><td>235</td><td>Design issue fee</td></tr> <tr><td>1503</td><td>630</td><td>2503</td><td>315</td><td>Plant issue fee</td></tr> <tr><td>1460</td><td>130</td><td>1460</td><td>130</td><td>Petitions to the Commissioner</td></tr> <tr><td>1807</td><td>50</td><td>1807</td><td>50</td><td>Processing fee under 37 CFR 1.17(d)</td></tr> <tr><td>1806</td><td>180</td><td>1806</td><td>180</td><td>Submission of IDS</td></tr> <tr><td>8021</td><td>40</td><td>8021</td><td>40</td><td>Recording each patent assignment per property (times number of properties)</td></tr> <tr><td>1808</td><td>750</td><td>2808</td><td>375</td><td>Filing a submission after final rejection (37 CFR § 1.129(a))</td></tr> <tr><td>1810</td><td>750</td><td>2810</td><td>375</td><td>For each additional invention to be examined (37 CFR § 1.129(b))</td></tr> <tr><td>1801</td><td>750</td><td>2801</td><td>375</td><td>Request for Continued Examination (RCE)</td></tr> <tr><td>1802</td><td>900</td><td>1802</td><td>900</td><td>Request for expedited examination of a design application</td></tr> <tr><td colspan="5">Other fee (specify): _____</td></tr> </tbody> </table> |                    | Large Entity   |                  | Small Entity    |                    | Fee Description | Fee Code | Fee (\$) | Fee Code | Fee (\$)               | 1051 | 130  | 2051 | 65   | Surcharge - late filing fee or oath | 1052                              | 50 | 2052 | 25               | Surcharge - late Provisional filing | 1053 | 130                                   | 1053 | 130  | Non-English specification | 1812 | 2520 | 1812  | 2520 | For filing a request for ex parte Reexamination | 1804 | 920* | 1804 | 920*  | Requesting publication of SIR prior to Examiner action | 1805                | 1840* | 1805 | 1840* | Requesting publication of SIR after Examiner action | 1251             | 110 | 2251 | 55 | Extension for reply within first month | 1252 | 410 | 2252 | 205 | Extension for reply within second month | 1253 | 830 | 2253 | 465 | Extension for reply within third month | 1254 | 1450 | 2254 | 725 | Extension for reply within fourth month | 1255 | 1870 | 2255 | 985 | Extension for reply within fifth month | 1401 | 320 | 2401 | 160 | Notice of Appeal | 1402 | 320 | 2402 | 160 | Filing a brief in support of an appeal | 1403 | 260 | 2403 | 140 | Request for oral hearing | 1451 | 1510 | 1451 | 1510 | Petition to institute a public use proceeding | 1452 | 110 | 2452 | 55 | Petition to revive - unavoidable | 1453 | 1300 | 2453 | 650 | Petition to revive - unintentional | 1501 | 1300 | 2501 | 650 | Utility issue fee (or reissue) | 1502 | 470 | 2502 | 235 | Design issue fee | 1503 | 630 | 2503 | 315 | Plant issue fee | 1460 | 130 | 1460 | 130 | Petitions to the Commissioner | 1807 | 50 | 1807 | 50 | Processing fee under 37 CFR 1.17(d) | 1806 | 180 | 1806 | 180 | Submission of IDS | 8021 | 40 | 8021 | 40 | Recording each patent assignment per property (times number of properties) | 1808 | 750 | 2808 | 375 | Filing a submission after final rejection (37 CFR § 1.129(a)) | 1810 | 750 | 2810 | 375 | For each additional invention to be examined (37 CFR § 1.129(b)) | 1801 | 750 | 2801 | 375 | Request for Continued Examination (RCE) | 1802 | 900 | 1802 | 900 | Request for expedited examination of a design application | Other fee (specify): _____ |  |  |  |  |
| Large Entity  |                                  | Small Entity   |                    | Fee Description  |                  |                 |                    |                 |          |          |          |                        |      |      |      |      |                                     |                                   |    |      |                  |                                     |      |                                       |      |      |                           |      |      |   |      |   |      |      |      |   |  |                     |       |      |       |   |                  |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                            |  |  |  |  |
| Fee Code  | Fee (\$)                         | Fee Code   | Fee (\$)           |  |                  |                 |                    |                 |          |          |          |                        |      |      |      |      |                                     |                                   |    |      |                  |                                     |      |                                       |      |      |                           |      |      |   |      |   |      |      |      |   |  |                     |       |      |       |   |                  |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                            |  |  |  |  |
| 1051  | 130                              | 2051   | 65                 | Surcharge - late filing fee or oath  |                  |                 |                    |                 |          |          |          |                        |      |      |      |      |                                     |                                   |    |      |                  |                                     |      |                                       |      |      |                           |      |      |   |      |   |      |      |      |   |  |                     |       |      |       |   |                  |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                            |  |  |  |  |
| 1052  | 50                               | 2052   | 25                 | Surcharge - late Provisional filing  |                  |                 |                    |                 |          |          |          |                        |      |      |      |      |                                     |                                   |    |      |                  |                                     |      |                                       |      |      |                           |      |      |   |      |   |      |      |      |   |  |                     |       |      |       |   |                  |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                            |  |  |  |  |
| 1053  | 130                              | 1053   | 130                | Non-English specification  |                  |                 |                    |                 |          |          |          |                        |      |      |      |      |                                     |                                   |    |      |                  |                                     |      |                                       |      |      |                           |      |      |   |      |   |      |      |      |   |  |                     |       |      |       |   |                  |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                            |  |  |  |  |
| 1812  | 2520                             | 1812   | 2520               | For filing a request for ex parte Reexamination                            |                  |                 |                    |                 |          |          |          |                        |      |      |      |      |                                     |                                   |    |      |                  |                                     |      |                                       |      |      |                           |      |      |   |      |   |      |      |      |   |  |                     |       |      |       |   |                  |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                            |  |  |  |  |
| 1804  | 920*                             | 1804   | 920*               | Requesting publication of SIR prior to Examiner action                     |                  |                 |                    |                 |          |          |          |                        |      |      |      |      |                                     |                                   |    |      |                  |                                     |      |                                       |      |      |                           |      |      |   |      |   |      |      |      |   |  |                     |       |      |       |   |                  |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                            |  |  |  |  |
| 1805  | 1840*                            | 1805   | 1840*              | Requesting publication of SIR after Examiner action                        |                  |                 |                    |                 |          |          |          |                        |      |      |      |      |                                     |                                   |    |      |                  |                                     |      |                                       |      |      |                           |      |      |   |      |   |      |      |      |   |  |                     |       |      |       |   |                  |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                            |  |  |  |  |
| 1251  | 110                              | 2251   | 55                 | Extension for reply within first month                                     |                  |                 |                    |                 |          |          |          |                        |      |      |      |      |                                     |                                   |    |      |                  |                                     |      |                                       |      |      |                           |      |      |   |      |   |      |      |      |   |  |                     |       |      |       |   |                  |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                            |  |  |  |  |
| 1252  | 410                              | 2252   | 205                | Extension for reply within second month                                    |                  |                 |                    |                 |          |          |          |                        |      |      |      |      |                                     |                                   |    |      |                  |                                     |      |                                       |      |      |                           |      |      |   |      |   |      |      |      |   |  |                     |       |      |       |   |                  |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                            |  |  |  |  |
| 1253  | 830                              | 2253   | 465                | Extension for reply within third month                                     |                  |                 |                    |                 |          |          |          |                        |      |      |      |      |                                     |                                   |    |      |                  |                                     |      |                                       |      |      |                           |      |      |   |      |   |      |      |      |   |  |                     |       |      |       |   |                  |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                            |  |  |  |  |
| 1254  | 1450                             | 2254   | 725                | Extension for reply within fourth month                                    |                  |                 |                    |                 |          |          |          |                        |      |      |      |      |                                     |                                   |    |      |                  |                                     |      |                                       |      |      |                           |      |      |   |      |   |      |      |      |   |  |                     |       |      |       |   |                  |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                            |  |  |  |  |
| 1255  | 1870                             | 2255   | 985                | Extension for reply within fifth month                                     |                  |                 |                    |                 |          |          |          |                        |      |      |      |      |                                     |                                   |    |      |                  |                                     |      |                                       |      |      |                           |      |      |   |      |   |      |      |      |   |  |                     |       |      |       |   |                  |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                            |  |  |  |  |
| 1401  | 320                              | 2401   | 160                | Notice of Appeal   |                  |                 |                    |                 |          |          |          |                        |      |      |      |      |                                     |                                   |    |      |                  |                                     |      |                                       |      |      |                           |      |      |   |      |   |      |      |      |   |  |                     |       |      |       |   |                  |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                            |  |  |  |  |
| 1402  | 320                              | 2402   | 160                | Filing a brief in support of an appeal                                     |                  |                 |                    |                 |          |          |          |                        |      |      |      |      |                                     |                                   |    |      |                  |                                     |      |                                       |      |      |                           |      |      |   |      |   |      |      |      |   |  |                     |       |      |       |   |                  |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                            |  |  |  |  |
| 1403  | 260                              | 2403   | 140                | Request for oral hearing   |                  |                 |                    |                 |          |          |          |                        |      |      |      |      |                                     |                                   |    |      |                  |                                     |      |                                       |      |      |                           |      |      |   |      |   |      |      |      |   |  |                     |       |      |       |   |                  |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                            |  |  |  |  |
| 1451  | 1510                             | 1451   | 1510               | Petition to institute a public use proceeding                              |                  |                 |                    |                 |          |          |          |                        |      |      |      |      |                                     |                                   |    |      |                  |                                     |      |                                       |      |      |                           |      |      |   |      |   |      |      |      |   |  |                     |       |      |       |   |                  |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                            |  |  |  |  |
| 1452  | 110                              | 2452   | 55                 | Petition to revive - unavoidable   |                  |                 |                    |                 |          |          |          |                        |      |      |      |      |                                     |                                   |    |      |                  |                                     |      |                                       |      |      |                           |      |      |   |      |   |      |      |      |   |  |                     |       |      |       |   |                  |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                            |  |  |  |  |
| 1453  | 1300                             | 2453   | 650                | Petition to revive - unintentional   |                  |                 |                    |                 |          |          |          |                        |      |      |      |      |                                     |                                   |    |      |                  |                                     |      |                                       |      |      |                           |      |      |   |      |   |      |      |      |   |  |                     |       |      |       |   |                  |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                            |  |  |  |  |
| 1501  | 1300                             | 2501   | 650                | Utility issue fee (or reissue)   |                  |                 |                    |                 |          |          |          |                        |      |      |      |      |                                     |                                   |    |      |                  |                                     |      |                                       |      |      |                           |      |      |   |      |   |      |      |      |   |  |                     |       |      |       |   |                  |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                            |  |  |  |  |
| 1502  | 470                              | 2502   | 235                | Design issue fee   |                  |                 |                    |                 |          |          |          |                        |      |      |      |      |                                     |                                   |    |      |                  |                                     |      |                                       |      |      |                           |      |      |   |      |   |      |      |      |   |  |                     |       |      |       |   |                  |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                            |  |  |  |  |
| 1503  | 630                              | 2503   | 315                | Plant issue fee  |                  |                 |                    |                 |          |          |          |                        |      |      |      |      |                                     |                                   |    |      |                  |                                     |      |                                       |      |      |                           |      |      |   |      |   |      |      |      |   |  |                     |       |      |       |   |                  |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                            |  |  |  |  |
| 1460  | 130                              | 1460   | 130                | Petitions to the Commissioner  |                  |                 |                    |                 |          |          |          |                        |      |      |      |      |                                     |                                   |    |      |                  |                                     |      |                                       |      |      |                           |      |      |   |      |   |      |      |      |   |  |                     |       |      |       |   |                  |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                            |  |  |  |  |
| 1807  | 50                               | 1807   | 50                 | Processing fee under 37 CFR 1.17(d)  |                  |                 |                    |                 |          |          |          |                        |      |      |      |      |                                     |                                   |    |      |                  |                                     |      |                                       |      |      |                           |      |      |   |      |   |      |      |      |   |  |                     |       |      |       |   |                  |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                            |  |  |  |  |
| 1806  | 180                              | 1806   | 180                | Submission of IDS  |                  |                 |                    |                 |          |          |          |                        |      |      |      |      |                                     |                                   |    |      |                  |                                     |      |                                       |      |      |                           |      |      |   |      |   |      |      |      |   |  |                     |       |      |       |   |                  |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                            |  |  |  |  |
| 8021  | 40                               | 8021   | 40                 | Recording each patent assignment per property (times number of properties) |                  |                 |                    |                 |          |          |          |                        |      |      |      |      |                                     |                                   |    |      |                  |                                     |      |                                       |      |      |                           |      |      |   |      |   |      |      |      |   |  |                     |       |      |       |   |                  |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                            |  |  |  |  |
| 1808  | 750                              | 2808   | 375                | Filing a submission after final rejection (37 CFR § 1.129(a))              |                  |                 |                    |                 |          |          |          |                        |      |      |      |      |                                     |                                   |    |      |                  |                                     |      |                                       |      |      |                           |      |      |   |      |   |      |      |      |   |  |                     |       |      |       |   |                  |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                            |  |  |  |  |
| 1810  | 750                              | 2810   | 375                | For each additional invention to be examined (37 CFR § 1.129(b))           |                  |                 |                    |                 |          |          |          |                        |      |      |      |      |                                     |                                   |    |      |                  |                                     |      |                                       |      |      |                           |      |      |   |      |   |      |      |      |   |  |                     |       |      |       |   |                  |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                            |  |  |  |  |
| 1801  | 750                              | 2801   | 375                | Request for Continued Examination (RCE)                                    |                  |                 |                    |                 |          |          |          |                        |      |      |      |      |                                     |                                   |    |      |                  |                                     |      |                                       |      |      |                           |      |      |   |      |   |      |      |      |   |  |                     |       |      |       |   |                  |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                            |  |  |  |  |
| 1802  | 900                              | 1802   | 900                | Request for expedited examination of a design application                  |                  |                 |                    |                 |          |          |          |                        |      |      |      |      |                                     |                                   |    |      |                  |                                     |      |                                       |      |      |                           |      |      |   |      |   |      |      |      |   |  |                     |       |      |       |   |                  |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                            |  |  |  |  |
| Other fee (specify): _____  |                                  |  |                    |  |                  |                 |                    |                 |          |          |          |                        |      |      |      |      |                                     |                                   |    |      |                  |                                     |      |                                       |      |      |                           |      |      |   |      |   |      |      |      |   |  |                     |       |      |       |   |                  |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                            |  |  |  |  |
| FEE CALCULATION   |                                  |  |                    |  |                  |                 |                    |                 |          |          |          |                        |      |      |      |      |                                     |                                   |    |      |                  |                                     |      |                                       |      |      |                           |      |      |   |      |   |      |      |      |   |  |                     |       |      |       |   |                  |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                            |  |  |  |  |
| <b>1. BASIC FILING FEE</b><br><table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Large Fee Code</th> <th>Entity Fee (\$)</th> <th>Small Fee Code</th> <th>Entity Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>1001</td><td>750</td><td>2001</td><td>375</td><td>Utility filing fee</td><td></td></tr> <tr><td>1002</td><td>390</td><td>2002</td><td>195</td><td>Design filing fee</td><td></td></tr> <tr><td>1003</td><td>520</td><td>2003</td><td>260</td><td>Plant filing fee</td><td></td></tr> <tr><td>1004</td><td>750</td><td>2004</td><td>375</td><td>Reissue filing fee</td><td></td></tr> <tr><td>1005</td><td>160</td><td>2005</td><td>80</td><td>Provisional filing fee</td><td></td></tr> <tr><td colspan="5" style="text-align: right;"><b>SUBTOTAL (1)</b></td><td><b>(\$)</b> 0.00</td></tr> </tbody> </table>   |                                  | Large Fee Code   | Entity Fee (\$)    | Small Fee Code   | Entity Fee (\$)  | Fee Description | Fee Paid           | 1001            | 750      | 2001     | 375      | Utility filing fee     |      | 1002 | 390  | 2002 | 195                                 | Design filing fee                 |    | 1003 | 520              | 2003                                | 260  | Plant filing fee                      |      | 1004 | 750                       | 2004 | 375  | Reissue filing fee                                |      | 1005  | 160  | 2005 | 80   | Provisional filing fee                                    |  | <b>SUBTOTAL (1)</b> |       |      |       |   | <b>(\$)</b> 0.00 |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                            |  |  |  |  |
| Large Fee Code  | Entity Fee (\$)                  | Small Fee Code   | Entity Fee (\$)    | Fee Description  | Fee Paid         |                 |                    |                 |          |          |          |                        |      |      |      |      |                                     |                                   |    |      |                  |                                     |      |                                       |      |      |                           |      |      |   |      |   |      |      |      |   |  |                     |       |      |       |   |                  |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                            |  |  |  |  |
| 1001  | 750                              | 2001   | 375                | Utility filing fee   |                  |                 |                    |                 |          |          |          |                        |      |      |      |      |                                     |                                   |    |      |                  |                                     |      |                                       |      |      |                           |      |      |   |      |   |      |      |      |   |  |                     |       |      |       |   |                  |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                            |  |  |  |  |
| 1002  | 390                              | 2002   | 195                | Design filing fee  |                  |                 |                    |                 |          |          |          |                        |      |      |      |      |                                     |                                   |    |      |                  |                                     |      |                                       |      |      |                           |      |      |   |      |   |      |      |      |   |  |                     |       |      |       |   |                  |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                            |  |  |  |  |
| 1003  | 520                              | 2003   | 260                | Plant filing fee   |                  |                 |                    |                 |          |          |          |                        |      |      |      |      |                                     |                                   |    |      |                  |                                     |      |                                       |      |      |                           |      |      |   |      |   |      |      |      |   |  |                     |       |      |       |   |                  |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                            |  |  |  |  |
| 1004  | 750                              | 2004   | 375                | Reissue filing fee   |                  |                 |                    |                 |          |          |          |                        |      |      |      |      |                                     |                                   |    |      |                  |                                     |      |                                       |      |      |                           |      |      |   |      |   |      |      |      |   |  |                     |       |      |       |   |                  |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                            |  |  |  |  |
| 1005  | 160                              | 2005   | 80                 | Provisional filing fee   |                  |                 |                    |                 |          |          |          |                        |      |      |      |      |                                     |                                   |    |      |                  |                                     |      |                                       |      |      |                           |      |      |   |      |   |      |      |      |   |  |                     |       |      |       |   |                  |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                            |  |  |  |  |
| <b>SUBTOTAL (1)</b>   |                                  |  |                    |  | <b>(\$)</b> 0.00 |                 |                    |                 |          |          |          |                        |      |      |      |      |                                     |                                   |    |      |                  |                                     |      |                                       |      |      |                           |      |      |   |      |   |      |      |      |   |  |                     |       |      |       |   |                  |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                            |  |  |  |  |
| <b>2. EXTRA CLAIM FEES</b><br><table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Total Claims</th> <th>Previously Paid**</th> <th>Extra Claims</th> <th>Fee from below</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>Independent Claims</td> <td>20</td> <td>X</td> <td>18</td> <td></td> </tr> <tr> <td>Multiple Dependent</td> <td>3</td> <td>X</td> <td>84</td> <td></td> </tr> <tr> <td colspan="4" style="text-align: right;"><b>SUBTOTAL (2)</b></td> <td><b>(\$)</b> 0.00</td> </tr> </tbody> </table>   |                                  | Total Claims   | Previously Paid**  | Extra Claims   | Fee from below   | Fee Paid        | Independent Claims | 20              | X        | 18       |          | Multiple Dependent     | 3    | X    | 84   |      | <b>SUBTOTAL (2)</b>                 |                                   |    |      | <b>(\$)</b> 0.00 |                                     |      |                                       |      |      |                           |      |      |   |      |   |      |      |      |   |  |                     |       |      |       |   |                  |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                            |  |  |  |  |
| Total Claims  | Previously Paid**                | Extra Claims   | Fee from below     | Fee Paid   |                  |                 |                    |                 |          |          |          |                        |      |      |      |      |                                     |                                   |    |      |                  |                                     |      |                                       |      |      |                           |      |      |   |      |   |      |      |      |   |  |                     |       |      |       |   |                  |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                            |  |  |  |  |
| Independent Claims  | 20                               | X  | 18                 |  |                  |                 |                    |                 |          |          |          |                        |      |      |      |      |                                     |                                   |    |      |                  |                                     |      |                                       |      |      |                           |      |      |   |      |   |      |      |      |   |  |                     |       |      |       |   |                  |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                            |  |  |  |  |
| Multiple Dependent  | 3                                | X  | 84                 |  |                  |                 |                    |                 |          |          |          |                        |      |      |      |      |                                     |                                   |    |      |                  |                                     |      |                                       |      |      |                           |      |      |   |      |   |      |      |      |   |  |                     |       |      |       |   |                  |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                            |  |  |  |  |
| <b>SUBTOTAL (2)</b>   |                                  |  |                    | <b>(\$)</b> 0.00   |                  |                 |                    |                 |          |          |          |                        |      |      |      |      |                                     |                                   |    |      |                  |                                     |      |                                       |      |      |                           |      |      |   |      |   |      |      |      |   |  |                     |       |      |       |   |                  |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                            |  |  |  |  |
| <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Large Fee Code</th> <th>Entity Fee (\$)</th> <th>Small Fee Code</th> <th>Entity Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>1202</td><td>18</td><td>2202</td><td>9</td><td>Claims in excess of 20</td><td></td></tr> <tr><td>1201</td><td>84</td><td>2201</td><td>42</td><td>Independent claims in excess of 3</td><td></td></tr> <tr><td>1203</td><td>280</td><td>2203</td><td>140</td><td>Multiple dependent claim, if not paid</td><td></td></tr> <tr><td>1204</td><td>84</td><td>2204</td><td>42</td><td>* Reissue independent claims over original patent</td><td></td></tr> <tr><td>1205</td><td>18</td><td>2205</td><td>9</td><td>* Reissue claims in excess of 20 and over original patent</td><td></td></tr> <tr><td colspan="5" style="text-align: right;"><b>SUBTOTAL (2)</b></td><td><b>(\$)</b> 0.00</td></tr> </tbody> </table> |                                  | Large Fee Code   | Entity Fee (\$)    | Small Fee Code   | Entity Fee (\$)  | Fee Description | Fee Paid           | 1202            | 18       | 2202     | 9        | Claims in excess of 20 |      | 1201 | 84   | 2201 | 42                                  | Independent claims in excess of 3 |    | 1203 | 280              | 2203                                | 140  | Multiple dependent claim, if not paid |      | 1204 | 84                        | 2204 | 42   | * Reissue independent claims over original patent |      | 1205  | 18   | 2205 | 9    | * Reissue claims in excess of 20 and over original patent |  | <b>SUBTOTAL (2)</b> |       |      |       |   | <b>(\$)</b> 0.00 |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                            |  |  |  |  |
| Large Fee Code  | Entity Fee (\$)                  | Small Fee Code   | Entity Fee (\$)    | Fee Description  | Fee Paid         |                 |                    |                 |          |          |          |                        |      |      |      |      |                                     |                                   |    |      |                  |                                     |      |                                       |      |      |                           |      |      |   |      |   |      |      |      |   |  |                     |       |      |       |   |                  |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                            |  |  |  |  |
| 1202  | 18                               | 2202   | 9                  | Claims in excess of 20   |                  |                 |                    |                 |          |          |          |                        |      |      |      |      |                                     |                                   |    |      |                  |                                     |      |                                       |      |      |                           |      |      |   |      |   |      |      |      |   |  |                     |       |      |       |   |                  |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                            |  |  |  |  |
| 1201  | 84                               | 2201   | 42                 | Independent claims in excess of 3  |                  |                 |                    |                 |          |          |          |                        |      |      |      |      |                                     |                                   |    |      |                  |                                     |      |                                       |      |      |                           |      |      |   |      |   |      |      |      |   |  |                     |       |      |       |   |                  |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                            |  |  |  |  |
| 1203  | 280                              | 2203   | 140                | Multiple dependent claim, if not paid                                      |                  |                 |                    |                 |          |          |          |                        |      |      |      |      |                                     |                                   |    |      |                  |                                     |      |                                       |      |      |                           |      |      |   |      |   |      |      |      |   |  |                     |       |      |       |   |                  |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                            |  |  |  |  |
| 1204  | 84                               | 2204   | 42                 | * Reissue independent claims over original patent                          |                  |                 |                    |                 |          |          |          |                        |      |      |      |      |                                     |                                   |    |      |                  |                                     |      |                                       |      |      |                           |      |      |   |      |   |      |      |      |   |  |                     |       |      |       |   |                  |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                            |  |  |  |  |
| 1205  | 18                               | 2205   | 9                  | * Reissue claims in excess of 20 and over original patent                  |                  |                 |                    |                 |          |          |          |                        |      |      |      |      |                                     |                                   |    |      |                  |                                     |      |                                       |      |      |                           |      |      |   |      |   |      |      |      |   |  |                     |       |      |       |   |                  |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                            |  |  |  |  |
| <b>SUBTOTAL (2)</b>   |                                  |  |                    |  | <b>(\$)</b> 0.00 |                 |                    |                 |          |          |          |                        |      |      |      |      |                                     |                                   |    |      |                  |                                     |      |                                       |      |      |                           |      |      |   |      |   |      |      |      |   |  |                     |       |      |       |   |                  |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                            |  |  |  |  |
| **OR NUMBER PREVIOUSLY PAID, IF GREATER THAN STANDARD ALLOWANCE.<br>*For Reissues, see above  |                                  |  |                    |  |                  |                 |                    |                 |          |          |          |                        |      |      |      |      |                                     |                                   |    |      |                  |                                     |      |                                       |      |      |                           |      |      |   |      |   |      |      |      |   |  |                     |       |      |       |   |                  |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                            |  |  |  |  |
| SUBMITTED BY  |                                  | Complete (if applicable)   |                    |  |                  |                 |                    |                 |          |          |          |                        |      |      |      |      |                                     |                                   |    |      |                  |                                     |      |                                       |      |      |                           |      |      |   |      |   |      |      |      |   |  |                     |       |      |       |   |                  |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                            |  |  |  |  |
| Name (Print/Type)   | Michael J. Balconi-Lamica        | Registration No.   | 34,291             |  |                  |                 |                    |                 |          |          |          |                        |      |      |      |      |                                     |                                   |    |      |                  |                                     |      |                                       |      |      |                           |      |      |   |      |   |      |      |      |   |  |                     |       |      |       |   |                  |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                            |  |  |  |  |
| Telephone   |                                  | Telephone  | 512.996.6839       |  |                  |                 |                    |                 |          |          |          |                        |      |      |      |      |                                     |                                   |    |      |                  |                                     |      |                                       |      |      |                           |      |      |   |      |   |      |      |      |   |  |                     |       |      |       |   |                  |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                            |  |  |  |  |
| Signature   | <i>Michael J. Balconi-Lamica</i> | Date   | 7/28/03            |  |                  |                 |                    |                 |          |          |          |                        |      |      |      |      |                                     |                                   |    |      |                  |                                     |      |                                       |      |      |                           |      |      |   |      |   |      |      |      |   |  |                     |       |      |       |   |                  |     |      |    |  |      |     |      |     |   |      |     |      |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                            |  |  |  |  |